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REISSUE APPLICATION DECLARATION BY THE ASSIGNEE	Docket Number (optional) 42P6963R			
I nereby declare that:				
The residence, mailing address and citizenship of the inventors are state	d below.			
I am authorized to act on behalf of the following assignee:	l Corporation			
and the little of my position with said assignee is: Chief Par	ent Counsel			
The entire title to the patent identified below is vested in said assignee.				
Inventor Ramkerthik Genesan	Citizenship Ind 1 a			
Residence/Mailing Address				
1219 Galston Drive, Folsom, CA 95630	Citizenship			
Owen W. Jungroth	USA			
Residence/Mailing Address 17550 Uplanda Drive, Sonora, CA 95370				
Additional Inventors are named on separately numbered sheets	attached hereto. Petent Issued			
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CTOCUTTE	•			
I believe said inventor(s) to be the original and first inventor(s) of the sub- patient, for which a reissue patent is sought on the invention entitled:	ect matter which is described and claimed in said			
1100 1100 1100	e application number/			
and was amended on (If applicable)				
I have reviewed and understand the contents of the above Identified speciamondment referred to above.	cification, including the daims, as amended by any			
I acknowledge the duty to disclose information which is material to palant	lability as defined in 37 CFR 1.56.			
t hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) a (or equivalent) lipting the foreign applications.	r (f), or 365(b), Attached is form PTO/SB/02B			
I verily believe the original patent to be wholly or partly inoperative or invebelow, (Check all boxes that apply.)	alid, for the reasons described			
by reason of a defective specification or drawing.				
by reason of the patentee claiming more or less than he had the rig	ght to claim in the petent			
by reason of other errors.				
Page 1 of 2] This collection of information is required by 37 CFR 1.175. The information is required to obtate process) an application. Comfidentiatity is governed by 35 U.S.C. 122 and 37 CFR 1.14. It gathoring, propering, and submitting the completed application form to the USPTO. Time a amount of time you require to complete this form shafar suggestions for reducing his part Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandry, VA 271. ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.	interconnection in eletimated to take de minimus to complete, endowing well vary depending upon the individual case. Any comments on the an, should be sent to the Chief Information Officer, U.S. Fateria are 1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS			
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REISSUE APPLICATION	DECLARATION BY THE ASSIGNEE	42P6963R
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